



NOTICE OF EFFECTIVE FILING

TO: PROGRAMS DIVISION 66
Kathleen Ott
DATE: April 1, 2021
FROM: Angela Caraballo
PHONE: 718 250-1732

PROGRAM: COMMERCIAL PROPERTY
Form attaches to ISO's Building and Personal Property Coverage Form - CP 00 10

CONTENTS: Cyber Incident Exclusion for Property Program Performance - 128429 (1-21)

Cyber Incident Exclusion With Ensuing Cause(S) Of Loss Exceptions for Property Program Performance - 128430 (1-21)

Rule Page For Property Program Performance - P3-CP-CW-RU (1-21)

STATE: OREGON

EFFECTIVE DATE: April 24, 2021

MODIFICATIONS: None

COMMENTS: None

COMPANY(IES) EFFECTIVE:

- GRANITE STATE INSURANCE COMPANY
- ILLINOIS NATIONAL INSURANCE CO.
- NEW HAMPSHIRE INSURANCE COMPANY

FILING NUMBER: AIG-21-CP-02



Tracking Number:

Filings	Messages	Billing	Settings	Filing Rules	Reports	Templates	Alerts
My Workfolder	My Open Filings	My Draft Filings	Search	Create Filing	Create Paper Filing		

Oregon

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This Filing has been marked as public access.

Product Name: Cyber Incident Exclusions / 151-640-288	SERFF Tr Num: AGNY-132762504	SERFF Status: Closed-Approved
TOI: 01.0 Property	State Tr Num: AGNY-132762504	State Status: Review completed
Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)	Co Tr Num: AIG-21-CP-02	Co Status:
Filing Type: Form/Rule	Date Submitted: 03/24/2021	Disposition Date: 03/30/2021
Effective Date Requested (New): 04/24/2021	Authors: Angela Caraballo	
Effective Date Requested (Renewal): 04/24/2021		

General Information	Form Schedule	Rate/Rule Schedule	Supporting Documentation	State Specific	Companies and Contact	Filing Fees	Filing Correspondence
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Form Count: 2

Item No.	Schedule Item Status	Form Name *	Form Number	Edition Date	Form Type *	Action *	Action Specific Data	Readability Score	Attachments	Submitted
1	Approved 03/29/2021	CYBER INCIDENT EXCLUSION For Property Program Performance	128429 (1-21)		END	New			128429 (1-21) Cyber Incident Exclusion (PROP PROG PERF).pdf	Date Submitted: 03/24/2021 By: Angela Caraballo
2	Approved 03/29/2021	CYBER INCIDENT EXCLUSION WITH ENSUING CAUSE(S) OF LOSS EXCEPTIONS For Property Program Performance	128430 (1-21)		END	New			128430 (1-21) Cyber Incident with Ensuing COL Excep (PROP PROG PERF).pdf	Date Submitted: 03/24/2021 By: Angela Caraballo

Form Type Legend:

- **ADV** = Advertising
- **BND** = Bond
- **CER** = Certificate
- **DSC** = Disclosure/Notice
- **END** = Endorsement/Amendment/Conditions
- **PCF** = Policy/Coverage Form
- **ABE** = Application/Binder/Enrollment
- **CNR** = Canc/NonRen Notice
- **DEC** = Declarations/Schedule
- **ERS** = Election/Rejection/Supplemental Applications
- **OTH** = Other

Icon Legend: - Draft Schedule Item - Open Objection

Add Authors

Update

Create Reminder

Move to Workfolder

PDF Pipeline

Clone Filing



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TOI: 01.0 Property	State Tr Num: AGNY-132762504	State Status: Review completed
Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)	Co Tr Num: AIG-21-CP-02	Co Status:
Filing Type: Form/Rule	Date Submitted: 03/24/2021	Disposition Date: 03/30/2021
Effective Date Requested (New): 04/24/2021	Authors: Angela Caraballo	
Effective Date Requested (Renewal): 04/24/2021		

General Information	Form Schedule	Rate/Rule Schedule	Supporting Documentation	State Specific	Companies and Contact	Filing Fees	Filing Correspondence
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The rate schedule has been marked public access.

Add Rate Data? Yes

Filing Method: Prior Approval

Rate Change Type: Neutral

Overall Percentage of Last Rate Revision: %

Effective Date of Last Rate Revision:

Filing Method of Last Filing: N/A - New Endorsement

SERFF Tracking Number of Last Filing:

Company Rate Information							
Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
Granite State Insurance Company	0.000 %	0.000 %	\$0.00	0	\$0.00	0.000 %	0.000 %
Illinois National Insurance Co.	0.000 %	0.000 %	\$0.00	0	\$0.00	0.000 %	0.000 %
New Hampshire Insurance Company	0.000 %	0.000 %	\$0.00	0	\$0.00	0.000 %	0.000 %

Overall Rate Information for Multiple Company Filings

Overall Percentage Rate Indicated For This Filing:	0.000 %
Overall Percentage Rate Impact For This Filing:	0.000 %
Effect of Rate Filing-Written Premium Change For This Program:	\$ 0
Effect of Rate Filing - Number of Policyholders Affected:	0

Item No.	Schedule Item Status	Exhibit Name: *	Rule# or Page #:	Rate Action: *	Previous State Filing Number:	Attach Document:	Submitted:
1	Reviewed-No Action 03/30/2021	RULE PAGE For Property Program Performance	P3-CP-CW-RU Ed. 1-21 Pages 1 & 2	New		 Cyber Proprietary Form Rule (PROP PROG PERF) 1-21.pdf	Date Submitted: 03/24/2021 By: Angela Caraballo

Icon Legend:  - Draft Schedule Item  - Open Objection

Add Authors	Update	Create Reminder	Move to Workfolder	PDF Pipeline	Clone Filing
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Disposition for AGNY-132762504

Filing at a Glance

State: Oregon	SERFF Tracking Number: AGNY-132762504
TOI: 01.0 Property	State Tracking Number: AGNY-132762504
Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)	Company Tracking Number: AIG-21-CP-02
Filing Type: Form/Rule	Product Name: Cyber Incident Exclusions / 151-640-288
First Filing Company: Granite State Insurance Company ,...	Project Name: Cyber Incident Exclusions - ISO & Property Program Performance Endorsement
	Destruction Date:

Disposition Date:

03/30/2021

Effective Date (New):

04/24/2021

Effective Date (Renewal):

04/24/2021

Status: *

Approved

Comments:

Department of Consumer and Business Services
Division of Financial Regulation - Product Regulation - Rates and Forms

Invitation to Comment on Quality of Service from the Division of Financial Regulation

We strive to provide excellent customer service at all times and invite you to provide written comment regarding your filing experience.

Instructions for submitting a filing are on our website at <http://www.oregon.gov/DCBS/insurance/insurers/rates-forms/Pages/rates-forms.aspx> or contained within SERFF under the Filing Rules tab. Filings that contain errors may be returned without having been accepted for review. Filing errors that are considered include; form numbers that do not match, forms attached under the wrong tab, or missing required documents. If we allow the company to correct a filing error it must be corrected within 24 hours or the filing will be rejected for no response.

If we contact you about compliance-related issues or corrections that need to be made to your filing, we must receive your complete response within 10 calendar days.

Any disapproval for reasons other than filing errors must be supported by our product standards. If you believe we have failed to meet our performance objectives or you believe we have provided outstanding performance, please let us know. We value your comments and will use this information to improve our service.

You may request that your comments be kept confidential; however, be aware that confidential feedback limits our ability to follow up, as your concerns cannot be shared with staff. If you are not requesting confidentially, please include the SERFF or state tracking number with your comments.

Please explain if the Division met its objective. Was your experience positive?

Comments:

Thank you,
 Tashia Sizemore
 Division of Financial Regulation
 Insurance Product Regulation and Compliance - Life and Health
 E-mail: tashia.sizemore@oregon.gov
 Telephone: 503-947-7270
 Fax: 503-378-4351

Brian J. Fordham
 Division of Financial Regulation
 Insurance Product Regulation and Compliance - Property Casualty
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 Telephone: 503-947-7205
 Fax: 503-378-4351

Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
Granite State Insurance Company	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %
Change Period for Approved Rate:							
Illinois National Insurance Co.	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %
Change Period for Approved Rate:							
New Hampshire Insurance Company	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %
Change Period for Approved Rate:							

Overall Rate Information for Multiple Company Filings

Overall Percentage Rate Indicated For This Filing:	0.000 %
Overall Percentage Rate Impact For This Filing:	0.000 %
Effect of Rate Filing-Written Premium Change For This Program:	\$ 0
Effect of Rate Filing - Number of Policyholders Affected:	0

Schedule Items			
Item Type	Item Name	Item Status	Public Access
Supporting Document	Cover Letter or Explanatory Memorandum	Reviewed-No Action	Yes
Supporting Document	Third party filers letter of authorization	Not Applicable to filing	Yes
Supporting Document	3894 Certification of Compliance	Reviewed-No Action	Yes
Supporting Document	3618 Standards for Monoline and Package Property	Not Applicable to filing	Yes
Supporting Document	Highlighted/Redline form version if a replaced, amended or similar forms	Not Applicable to filing	Yes
Supporting Document	Form Listing	Reviewed-No Action	Yes
Form	128429 (1-21), [No date], Endorsement/Amendment/Conditions, CYBER INCIDENT EXCLUSION For Property Program Performance	Approved	Yes
Form	128430 (1-21), [No date], Endorsement/Amendment/Conditions, CYBER INCIDENT EXCLUSION WITH ENSUING CAUSE(S) OF LOSS EXCEPTIONS For Property Program Performance	Approved	Yes
Rate	RULE PAGE For Property Program Performance, P3-CP-CW-RU Ed. 1-21 Pages 1 & 2	Reviewed-No Action	Yes